

## STATE OF CALIFORNIA

## CERTIFICATION OF VITAL RECORD

COUNTY of MERCED  
MERCED, CALIFORNIA

1202124002479

CERTIFICATE OF LIVE BIRTH  
STATE OF CALIFORNIA  
USE BLACK INK ONLY

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER	
THIS CHILD	1A NAME OF CHILD - FIRST DOMINIC	1B MIDDLE JAMES	1C LAST MCCLELLAND
	2 SEX MALE	3A THIS BIRTH, SINGLE, TWIN, ETC SINGLE	3B IF MULTIPLE, THIS CHILD 1ST, 2ND, ETC -
PLACE OF BIRTH	4A DATE OF BIRTH - MM/DD/YYYY 11/04/2021		4B HOUR - 24 HOUR CLOCK TIME 1232
	5A PLACE OF BIRTH - NAME OF HOSPITAL OR FACILITY MERCY MEDICAL CENTER		5B STREET ADDRESS - STREET AND NUMBER, OR LOCATION 333 MERCY AVENUE
NAME OF PARENT	5C CITY MERCED		5D COUNTY MERCED
	6A NAME OF PARENT - FIRST JOSEPH	6B MIDDLE MICHAEL	6C LAST - BIRTH NAME MCCLELLAND
NAME OF PARENT	6D <input type="checkbox"/> MOTHER <input checked="" type="checkbox"/> FATHER <input type="checkbox"/> PARENT		7 BIRTHPLACE - STATE/COUNTRY IL
	8A NAME OF PARENT - FIRST MONTIANA	8B MIDDLE LEANDRA	8C LAST - BIRTH NAME HARTS
INFORMANT AND BIRTH CERTIFICATION	9A <input checked="" type="checkbox"/> MOTHER <input type="checkbox"/> FATHER <input type="checkbox"/> PARENT		10 BIRTHPLACE - STATE/COUNTRY CA
	12A PARENT OR OTHER INFORMANT - SIGNATURE JOSEPH MICHAEL MCCLELLAND MONTIANA LEANDRA HARTS		12B RELATIONSHIP TO CHILD FATHER MOTHER
LOCAL NUMBER	13A ATTENDANT/CERTIFIER - SIGNATURE AND DEGREE OR TITLE CASSANDRA STOMPOLY, FBC DIR.		13B LICENSE NUMBER G70901
	13C DATE SIGNED 11/05/2021		13D DATE SIGNED 11/09/2021
13E TYPED NAME, TITLE AND MAILING ADDRESS OF ATTENDANT BRIAN JAMES VIERRA, MD SUITE D 378 W OLIVE AVENUE, MERCED, CA 95348		14 TYPED NAME AND TITLE OF CERTIFIER IF OTHER THAN ATTENDANT CASSANDRA STOMPOLY, FBC DIR.	
15A DATE OF DEATH - MM/DD/YYYY		15B STATE FILE NO. - STATE USE ONLY	
16 LOCAL REGISTRAR - SIGNATURE SALVADOR SANDOVAL, MD, MPH		17 DATE ACCEPTED FOR REGISTRATION - MM/DD/YYYY 11/09/2021	



\* 000418272 \*

CERTIFIED COPY OF VITAL RECORDS  
STATE OF CALIFORNIA, COUNTY OF MERCED-RECORDER

This is a true and exact reproduction of the document officially registered and placed on file in the office of the MERCED COUNTY RECORDER.

DATE ISSUED:

05/01/2025

MATT H. MAY

MERCED COUNTY RECORDER

This copy is not valid unless prepared on an engraved border, displaying the date, seal and signature of the Recorder.  
PRINTED (R) 1/02/01

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE